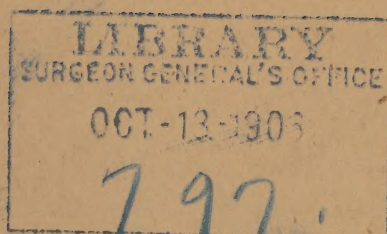


SCUDDER (C.L.)

The treatment of caries
of the ankle-joint



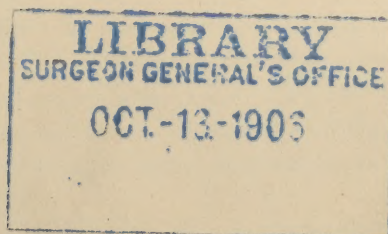
SCUDDER (C.L.)



THE TREATMENT OF CARIES OF THE
ANKLE JOINT.

By CHARLES L. SCUDDER, M.D.
OF BOSTON.

Read at the Annual Meeting of the Massachusetts Medical Society,
June 9, 1896.



THE TREATMENT OF CARRIES OF THE

ANKLE JOINT

BY CHARLES D. JOHNSON, M.D.

NEW YORK: PUBLISHED BY THE AUTHOR, 10 N. 2ND ST., N.Y.

ALBANY

1882

1882
1883
1884
1885
1886
1887
1888
1889
1890
1891
1892
1893
1894
1895
1896
1897
1898
1899
1900
1901
1902
1903
1904
1905
1906
1907
1908
1909
1910
1911
1912
1913
1914
1915
1916
1917
1918
1919
1920
1921
1922
1923
1924
1925
1926
1927
1928
1929
1930
1931
1932
1933
1934
1935
1936
1937
1938
1939
1940
1941
1942
1943
1944
1945
1946
1947
1948
1949
1950
1951
1952
1953
1954
1955
1956
1957
1958
1959
1960
1961
1962
1963
1964
1965
1966
1967
1968
1969
1970
1971
1972
1973
1974
1975
1976
1977
1978
1979
1980
1981
1982
1983
1984
1985
1986
1987
1988
1989
1990
1991
1992
1993
1994
1995
1996
1997
1998
1999
2000
2001
2002
2003
2004
2005
2006
2007
2008
2009
2010
2011
2012
2013
2014
2015
2016
2017
2018
2019
2020
2021
2022
2023
2024
2025
2026
2027
2028
2029
2030
2031
2032
2033
2034
2035
2036
2037
2038
2039
2040
2041
2042
2043
2044
2045
2046
2047
2048
2049
2050
2051
2052
2053
2054
2055
2056
2057
2058
2059
2060
2061
2062
2063
2064
2065
2066
2067
2068
2069
2070
2071
2072
2073
2074
2075
2076
2077
2078
2079
2080
2081
2082
2083
2084
2085
2086
2087
2088
2089
2090
2091
2092
2093
2094
2095
2096
2097
2098
2099
2100

THE TREATMENT OF CARIES OF THE ANKLE JOINT.

IN the five minutes at my disposal I will present to you the facts regarding the operative treatment of caries of the ankle joint as accepted by the majority of Continental, English and American surgeons.

By caries of the ankle is understood a more or less chronic tubercular inflammation, starting in the astragalus, tibia or fibula and occasionally involving other bones of the tarsus—i. e., a localized tuberculosis.

The great value of the treatment of caries of the joints by absolute immobilization and fixation is demonstrated beyond any doubt.

All cases of caries of the ankle should be first treated by the mechanical method unless operative interference is indicated by two things:

1. A failure of the general health.
2. Rapid progress in the local disease.

The moment that the non-operative or mechanical treatment is found inefficient, then an *operation* is demanded. Partial operations are of little value. Curetting and the burrdrill are contra-indicated. Complete excision of the diseased part (the entire bone being removed) is the very best operative procedure.

This is proved by the statistics of Culbertson, Hodges, Connor, Koslowski, Neuber and my own statistics of

eighteen cases reported from the records of the Children's Hospital, Boston, together with the evidence obtained from the records of private operators.

All operators advise complete excision of the diseased bone in *childhood*, because the duration of the disease is shortened, there is no mutilation of the foot, the general health improves immediately, there is no risk of sepsis, the danger of infection is removed, it is a safe operation, it will end the disease, and it will leave a serviceable limb.

In the case of adults partial operations are not valuable. If the expectant treatment fails amputation is necessitated.

Methods of excision.—The two lateral incisions are preferable—they expose the joint satisfactorily and no tendons are divided.

Note.—Two cases of caries of the ankle were exhibited which had been operated upon by excision of the astragalus four and five years previously. A perfectly useful ankle in each case exists to-day, with scarcely a perceptible limp.

